


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

| | | | |
|--|--|--|--|
| CORPORATION  | | FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS | |
| DOCUMENT # P97000007462 | | | |
| 1. Corporation Name Landmark Real Estate, Inc. | | | |
| 2. Principal Office Address 1390 S. Babcock St Suite, Apt. #, etc. City & State Melbourne, FL Zip Country 32901 USA | | 3. Mailing Office Address 1390 S. Babcock St Suite, Apt. #, etc. City & State Melbourne, FL Zip Country 32901 USA | |

FILED

02 APR 30 AM 11:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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*****50.00 *****50.00

| | |
|---|-------------------------------|
| 4. Date Incorporated or Qualified To Do Business in Florida Jan. 21, 1997 | |
| 5. FEI Number 59-3422154 | Applied For Not Applicable |
| 6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> | |

\$8.75 Additional Fee required for a Certificate of Status

| | |
|---|--|
| 7. Name and Address of Current Registered Agent Name Bea Linda Stonesifer Jaffe Street Address (P.O. Box Number is Not Acceptable) 2013 Oak St Suite, Apt. #, Etc. City Melbourne Beach State Zip Code FL 32951 | |
|---|--|

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent Bea Linda Stonesifer Jaffe Date 4/4/02

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Titles | Name of Officers and/or Directors | Street Address of Each Officer and/or Director | City / State / Zip |
|--------|-----------------------------------|--|---------------------------|
| P/S | Bea Linda Stonesifer Jaffe | 2013 Oak St | Melbourne Beach, FL 32951 |
| | | | |
| | | | |
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10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Bea Linda Stonesifer Jaffe Bea Linda Stonesifer Jaffe 4-4-02 321-728-4546

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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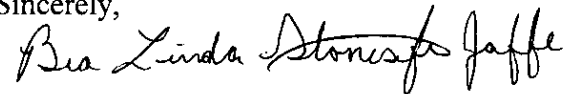
Bea Linda Stonesifer Jaffe
1390 South Babcock Street
Melbourne, FL 32901

April 1, 2002

To Whom It May Concern:

Due to a change in address, I have not received my notices to file and pay the fees with my annual report. I moved my office in May of 1999. Please reinstate my corporation, Landmark Real Estate, Inc. as soon as possible. After a phone conversation with your department, I was instructed to send a \$400.00 reinstatement fee along with the form which I downloaded from the internet. Please let me know if there is anything else that I need to do. I am enclosing the fee for a certificate of status as well. Thank you for your attention to this matter.

Sincerely,



Bea Linda Stonesifer Jaffe